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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 6029

SERIAL NUMBER 09/315,102	FILING DATE 05/20/1999 RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. 104706.111
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APPLICANTS

DAVID W. STEBBINGS, WASHINGTON, DC;

** CONTINUING DATA *****

This appln claims benefit of 60/086,132 05/20/1998

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED

** 06/10/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY DC	SHEETS DRAWING 25	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 5
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

24395
HALE & DORR LLP
THE WILLARD OFFICE BUILDING
1455 PENNSYLVANIA AVE, NW
WASHINGTON, DC
20004

TITLE

MODULATION METHOD FOR MINIMIZING PIRATING AND/OR UNAUTHORIZED COPYING AND/OR
UNAUTHORIZED ACCESS OF/TO DATA ON/FROM DATA MEDIA INCLUDING COMPACT DISCS AND
DIGITAL VERSATILE DISCS

FILING FEE

RECEIVED
1124

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
<input type="checkbox"/> 1.18 Fees (Issue)
<input type="checkbox"/> Other _____

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/315,102	05/20/99	711	2751	104706.111

APPLICANT

DAVID W. STEBBINGS, WASHINGTON, DC.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/086,132 05/20/98

****371 (NAT'L STAGE) DATA*******

VERIFIED

****FOREIGN APPLICATIONS*******

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/10/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DC	SHEETS DRAWING 25	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 5
Verified and Acknowledged Examiner's Initials _____ Initials _____					

~~SEE CUSTOMER NUMBER: 021269~~

ADDRESS
Irah H. Donner
The Willard Office Building
Hale and Dorn, LLP
1425 Pennsylvania Avenue, N.W.
Washington, DC 20004-1008

TITLE
MODULATION METHOD FOR MINIMIZING PIRATING AND/OR UNAUTHORIZED COPYING
AND/OR UNAUTHORIZED ACCESS OF/TO DATA ON/FROM DATA MEDIA INCLUDING
COMPACT DISCS AND DIGITAL VERSATILE DISCS

FILING FEE RECEIVED \$1,046	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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